

**Borough of Greencastle**60 North Washington Street  
Greencastle, PA 17225**EMPLOYMENT APPLICATION***Equal Employment Opportunity Employer*

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, sexual orientation or any other legally protected status. Applicants requiring accommodation in the application or hiring process should contact the Personnel Office.

(Please Print)	
Position(s) Applied For	Date of Application

How Did You Learn About Us?

_____ Advertisement	_____ Friend	_____ Walk-In
_____ Employment Agency	_____ Relative	_____ Other _____

Last Name	First Name	Middle Name
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Address	City	State	Zip
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Telephone Number(s)	Social Security Number
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	Yes	No
If you are under 18 years of age, can you provide required proof of your eligibility to work?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever filed an application with us before? <span style="float: right;">If yes, give date _____</span>	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been employed with us before? <span style="float: right;">If yes, give date _____</span>	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently employed?	<input type="checkbox"/>	<input type="checkbox"/>
May we contact your present employer?	<input type="checkbox"/>	<input type="checkbox"/>
Are you a U.S. Citizen or otherwise lawfully authorized to be employed in this country?	<input type="checkbox"/>	<input type="checkbox"/>

*Proof of citizenship or immigration status will be required upon employment.*

What date would you be available for work? \_\_\_\_\_

Are you available to work : \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Shift Work \_\_\_\_\_ Temporary

Are you currently on "lay-off" status and subject to recall?

Can you travel if a job requires it?

Have you been convicted of a felony or misdemeanor? *Conviction will not necessarily disqualify an applicant from employment.*

If yes, please explain \_\_\_\_\_

Education	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Indicate any foreign languages you can speak, read, and/or write			
	Fluent	Good	Fair
Speak			
Read			
Write			

Describe any specialized training, apprenticeship, skills, and extracurricular activities.

Describe any job-related training received in the United States Military.

Are you requesting consideration of Veteran's status? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you are, provide the following information:

Date of Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_  
(Verification of Veteran's status may be required)

### Employment Experience *Start with your present or last job.*

<b>1.</b>	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				
<b>2.</b>	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for leaving				
<b>3.</b>	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				

**If you need additional space, please continue on a separate sheet of paper.**

List professional, trade, business, or civic activities and offices held.

*You may exclude membership which reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:*

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### **Additional Information**

Do you have a valid Driver's License? \_\_\_\_\_ /State of Issuance: \_\_\_\_\_ /Driver's License No: \_\_\_\_\_

#### **Police Dept. Applicants Only:**

Do you have Act #120(Pennsylvania Municipal Police Officers Training Commission) Certificate? \_\_\_\_\_

If yes, M.P.O.E.T.C.# \_\_\_\_\_

#### **Other Qualifications**

Summarize special job-related skills and qualifications acquired from employment or other experience.

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State any additional information you feel may be helpful to us in considering your application.

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**Note to Applicants: Do not answer this question unless you have been informed about the requirements of the job for which you are applying.**

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied?      \_\_\_ Yes      \_\_\_ No

## Personal References

1. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_
2. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_
3. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_

## Professional References *Do not include any individuals who are related to you.*

1. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_
2. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_
3. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_

## Applicant's Statement

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby authorize all current and former employers, educational institutions, and references to release information relevant to my application for employment and I release the Borough, all current and former employers, educational institutions, and references from any and all liability related to the release of such information.

This application for employment shall be considered active for a period of two (2) years. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law or collective bargaining agreement, any employment relationship with this organization is of an "*at will*" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date